1	1	PATEN'	T APP	LICAT	ION FEE DE	TERMINA	oond to a collection of TION RECOR	noilsmolni lo	unless it d	S. DEPARTMEN	T OF COMERC	
•	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								App	Typication of Dockel Number		
RCE 2/8/06 CLAIMS AS FILED - PART 1											196.	
	FOR			(Column 1) (Column 2)			SMA	SMALL ENTITY		OR OTHER THAN		
1	BASIC FEE (37 OFR 1.16(a))						RATE	FEE			7	
- 1	TOTAL CLAIMS (37 CFR 1.16(c))	OTAL CLAIMS		48 minus 20 - 1				S	OR	RATE	- FR	
	NDEPENDENT CLAIMS 37 CFR 1.16(b))		5 minus 3 = -				x s 25	=	OR	FO	- 5	
							x s 100		OR	208	-	
		IULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						-	7	,360	-	
'	"If the difference in column 1 is less than zero, enter "0" in column 2.							1	- OR	+ & = 0	 	
		MENDE	D-PARTII	TOTAL	L	OR	TOTAL	<u> </u>				
	(Column 1)											
	₹	AIMS MINING	T	HIGHEST	(Column 3)	SMALL	ENTITY	OR	OTHE SMALL	R THAN ENTITY		
FNOMENT		AF	TER OMENT		PREVIOUSL	PRESENT Y EXTRA	RATE	ADDI- TIONAL		RATE	AD0	
	Total (3) CFR 1.16(c))	•		Minus	PAID FOR	=======================================	1 25	· FEE	1		TIONAL	
A F	Independent (31 OFR 1.16(b))	1		Minus	 	=	$\frac{x \cdot 25}{100}$	 	OR	x s <u>50</u> =		
AA	FIRST PRESE	MULTIPL	E DEPENI	DENT CLAIM (27)	250.1.454	x s 100=		OR	x s <u>200</u>			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ s 180=		. OR	+5360		
		(Colum	no. 11				ADD L FEE		OR	TOTAL ADD'L FEE		
В	T	CLA	IMS	·	(Column 2) HIGHEST	(Column 3)				,		
AMENDMENT		REMA			NUMBER PREVIOUSLY PAID FOR	PRESENT	RATE	ADDI- TIONAL	ll			
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							TOTAL		OR [+ 360.		
	<u>.</u>	(Columi	n 1)		(Caluma 2)		ADO'L FEE		OR	ADD L FEE		
C	CLAIMS HIGHEST											
		REMAIN AFTE	R .	1	NUMBER PREVIOUSLY	PRESENT	RATE	ADDI-		RATE		
AMENDMENT	Total (37 CFR 1.16(c))	AMENDA		Minus	PAID FOR	= -		TIONAL FEE	j	TOTAL	ADDI: TIONAL	
욂	Indépendent (37 CFR 1.16(b))			Minus			x s 25 =		OR I	ر ع الم	FEE	
AME			L			1	x s 100.			· ,200		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									360		
•	· If the entry in column 1 is less than the actorio									OTAL		
•••	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Pald For IN THIS SPACE is less than 20 enter "20" If the "Highest Number Previously Pald For IN THIS SPACE is less than 20 enter "20" If the entry in column 1 is less than the entry in column 3. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 4 is less than the entry in column 4 is less than 20 entry "20". If the entry in column 4 is less than the entry in column 4 is less than 20 entry "20". If the entry in column 4 is less than 20 entry "20".											

"If the "Highest Number Previously Paid For" (N THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any complete, on the amount of time you require to complete this form and/or suggestions for reburing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.